



Competency Framework for Nutrition in Humanitarian Contexts

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Competency Framework for Nutrition in Humanitarian Contexts

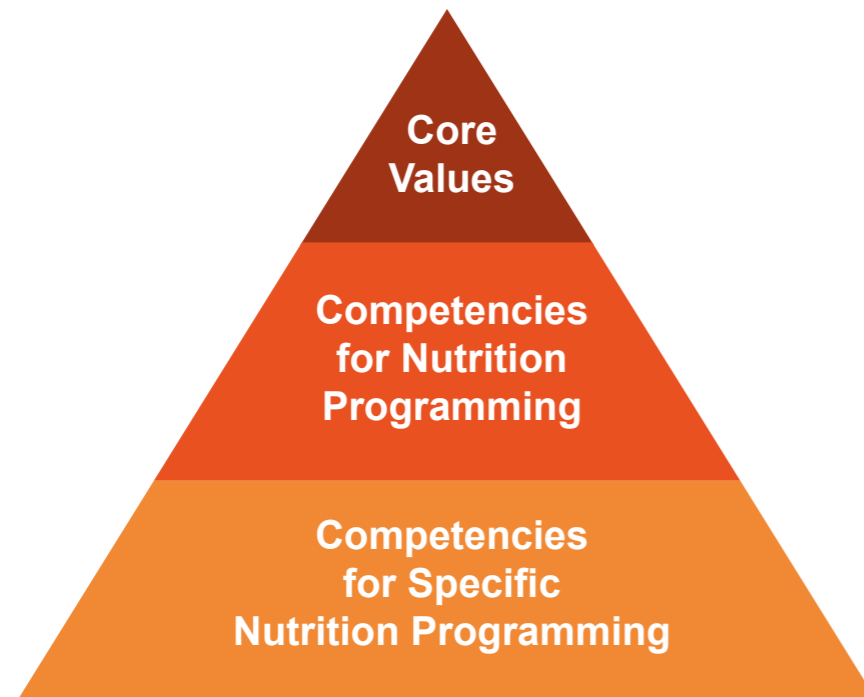


Figure 1: Structure of the Competency Framework

What is the purpose of the Competency Framework for Nutrition in Humanitarian Contexts?

The purpose of the Competency Framework for Nutrition in Humanitarian Contexts is to contribute to improved nutrition outcomes in humanitarian contexts by providing a standardised, inter-agency set of competencies required by people working in nutrition in humanitarian contexts to support:

- Improved effectiveness of individuals, teams and organisations
- Improved coordination and collaboration between organisations;
- Increased accountability to those who require assistance.

The framework reflects and promotes current and emerging best practice in nutrition in humanitarian contexts including:

- Integration of nutrition programming with other sectors, systems and services including food, health, water and sanitation, social protection and education;

- Integration of nutrition in emergency activities with ongoing and existing programming and the strengthening of linkages across humanitarian and development actors and activities in order to improve short- and long-term nutrition outcomes and promote resilience;
- Consideration of all forms of malnutrition in humanitarian contexts and their impact on morbidity, mortality and vulnerability.

The competencies outlined in the framework apply to employees and volunteers working for or with a wide range of organisations including those that are international, national and local, and those that are public, private and third sector.

Information about how the competency framework was developed can be found in annexes 2, 3 and 4.

How is the competency framework structured?

The Competency Framework for Nutrition in Humanitarian Contexts is comprised of three sections, each of which forms an essential part of the framework (see figure 1). The three sections are:

- **Core values** – which describe the principles or standards of behaviour which people working in nutrition in humanitarian contexts would be expected to demonstrate and which are fundamental to providing effective support for those affected by crisis.
- **Competencies for Nutrition Programming** – which describe the competencies required for all nutrition programmes. They are linked to the design, implementation and management of humanitarian programmes and to ways of working with others that ensure these programmes are well-coordinated, integrated into existing systems and contribute to an environment that supports good nutrition.
- **Competencies for Specific Nutrition Programming** – which describe the competencies required for specific nutrition programmes.

The categorisation of competencies into **Competencies for Nutrition Programming** and **Competencies for Specific Nutrition Programming** are intended to aid understanding of the types of competencies. Some users may feel that the distinction between the two groups is not important in their context, or that certain competencies are misplaced. In these cases, the user can make adaptations and use the framework without these categorisations.

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The **core values** are accompanied by behaviours which provide an indication of the ways in which someone might act when demonstrating the values. The **competencies for nutrition for programming** and the **competencies for specific nutrition programming** sections are sub-divided into competency domains, competencies and behaviours. Definitions of these terms can be found in figure 2 below.

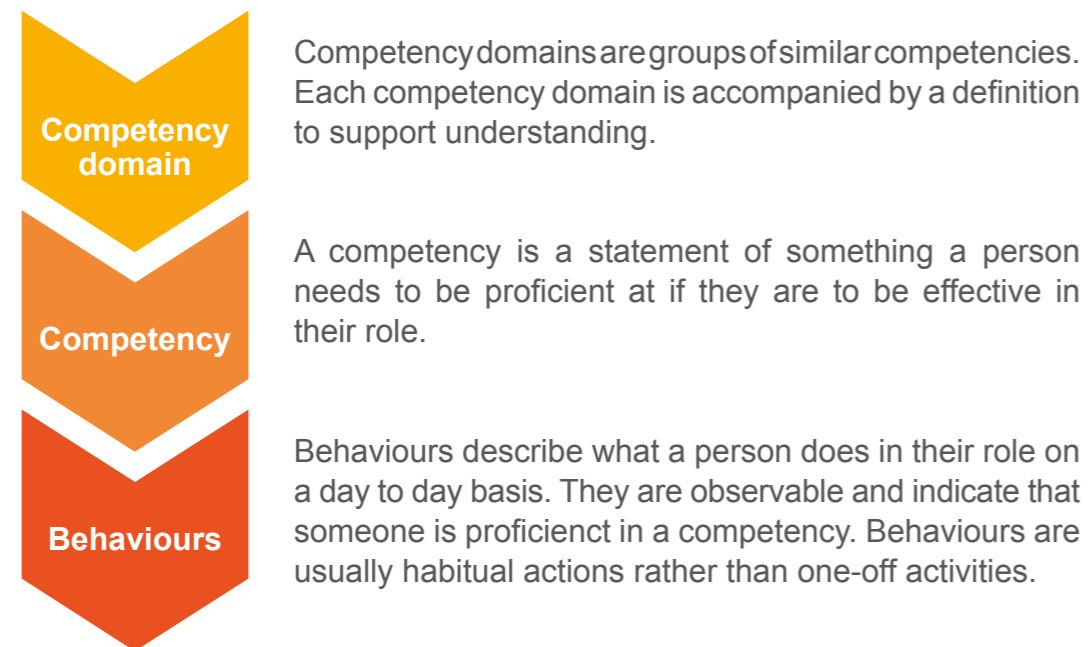


Figure 2: Competency Domains, Competencies and Behaviours

Behaviours rely on sets of underlying knowledge and skills, such as knowledge of the local context, knowledge of key guidance documents or protocols or interpersonal skills. Knowledge and skills areas are often specific to a context or organisation and as a result are not listed in competency frameworks.

- An overview of the core values and competency domains can be found on page 9,
- A breakdown of the core values with behaviours can be found on page 10,
- A full breakdown of each competency domain with competencies and behaviours can be found on pages 11-31.

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How can the Competency Framework for Nutrition in Humanitarian Contexts be used?

The competency framework can contribute to improved nutrition outcomes in humanitarian contexts by ensuring that organisations have competent staff and volunteers in place who are effectively managed and supported to deliver coordinated, timely aid to people affected by crisis. To achieve this, it can be used by individuals, employing organisations and educational institutions in a number of ways.

Individuals who work, or who are intending to work, in nutrition in humanitarian contexts, can use the framework to:

- Measure their own performance by conducting self-assessments against the competencies;
- Assess their learning and development needs, identify gaps and take steps to address these;
- Identify potential future career paths and map out steps they need to make in order to progress.

Employing organisations that implement nutrition programmes in humanitarian contexts can use the framework to:

- Improve organisational development and talent management processes, by mapping out the current competencies of their staff and identifying development or recruitment needs;
- Standardise recruitment and selection processes to ensure they are recruiting suitable, competent staff and volunteers in ways that are objective, consistent and fair;
- Improve the accountability and effectiveness of performance management and appraisal systems;
- Support the learning and development and career progression of their employees and volunteers to ensure they are up-to-date and competent.

Educational institutions that support pre-service and professional development of people working in nutrition in humanitarian contexts, can use the framework to:

- Inform course and curriculum design in order to effectively prepare their students to embark on or develop their professional careers.

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The competency framework has been developed for use by a wide variety of individuals, employing organisations and educational institutions. The competencies it describes therefore apply to a broad range of roles. The competencies that are described in the framework are intended to describe what is required collectively by those who are working in nutrition in humanitarian contexts. Using the framework therefore requires application, contextualisation and adaptation (see figure 3).

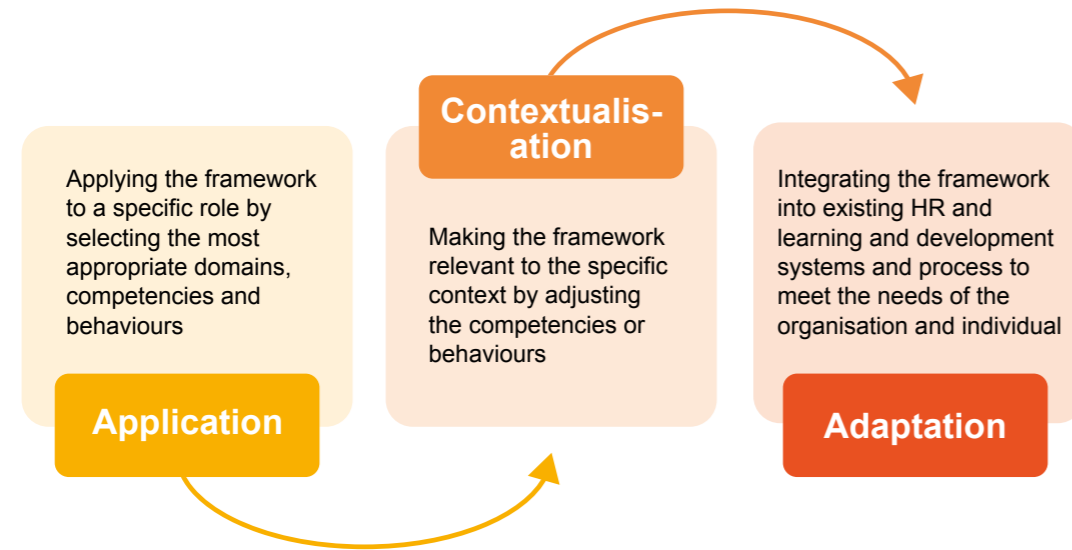


Figure 3: Using the Competency Framework

The **core values** outlined in the competency framework are considered to be fundamental to effective work in nutrition in humanitarian contexts. Because of this, they are intended to apply to everyone working in nutrition in humanitarian contexts regardless of role, context or seniority and it is recommended that all of the core values are selected. However,

- The specific behaviours linked to each core value may need to be contextualised so that they capture the most important and appropriate behaviours for that context;
- The core values may need to be adapted so that they can be used alongside any organisation-specific values if these have already been defined.

The **competency domains and competencies** outlined in the competency framework are intended to cover the breadth of roles within nutrition in humanitarian contexts. Because of the wide variety of roles, the domains and competencies do not apply in the same way to all roles. The most

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relevant domains and competencies for a role need to be selected so that realistic expectations for a role are set. For example:

- Some roles may have a specialisation or particular focus. This could happen in cases where an expert is required or when the person is working as part of a team with other specialists. In these cases, some domains and competencies may not apply and only a selection of the domains and competencies may be included in the job descriptions for these roles.
- By contrast, some roles may have a broader focus and require generalists who are able to demonstrate all of the competency domains and competencies. In these cases, it may be that some competencies are required at a higher level of proficiency than others and other competencies may have a more limited scope or scale. Even if all competencies apply, some might be prioritised above others.

When selecting competencies, it is important to remember that while some competencies relate to a specific set of activities, others may relate to ways of working that cut across multiple types of activities. For example, the competencies in the 'coordinating and collaborating with others' domain are not only applicable to those who attend coordination meetings but describe ways of working that everyone should demonstrate as they interact with others. In a similar way, the competencies in the 'strengthening capacities to protect, promote and support nutrition' domain do not only relate to specific capacity building activities such as the delivery of a training course, but should be demonstrated through all aspects of one's work.

The **specific behaviours** in the competency framework apply differently to different roles and may need to be contextualised and adapted. The behaviours that accompany each competency are grouped into three categories:

Behaviours that are needed if a role involves:

- Implementing nutrition interventions,
- Managing nutrition programmes and teams,
- Leading nutrition strategy development.

These categories are intended to reflect different types of responsibilities and as such:

- It is not expected that all roles will map neatly onto one category: some roles may be required to demonstrate behaviours from more than one category;

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- There is no implied or automatic progression across the three categories nor is one category inherently more 'senior' than another;
- Although the experience of previously working in an implementation role may benefit a manager, and working as a manager may benefit a leader, the behaviours across the three categories are not intended to be cumulative. Those whose current role fall entirely within the management or leadership category, would not be expected to automatically demonstrate the behaviours in other categories on a day-to-day basis.

Furthermore, the behaviours that are described in each category are intended to be indicative. This means that the list is not exhaustive and other behaviours may also be important in a particular role or context.

There are many factors that will affect how the categories apply to an individual role and which specific behaviours are required. These factors might include:

- The size of the organisation or team of which the role is part;
- The size of the project or programme that the role is engaged in;
- The number and specific responsibilities of people working in support functions such as M&E, Finance, Logistics etc;
- The organisational structure in terms of hierarchy and definition of responsibilities of roles.

It is recommended that decisions about how the competency framework applies to different roles are discussed within organisations, are documented in job descriptions and clearly communicated to staff or volunteers.

Further information on how to use the competency framework can be found in the Frequently Asked Questions in annex 1.

The Competency Framework for Nutrition in Humanitarian Contexts

Values and Competency Domains



Core values	Behaviours that are essential for all
Accountability and integrity	<ul style="list-style-type: none"> • Maintain principles and ethical standards • Seek to do no harm • Operate transparently • Hold self and others to account
Diversity and inclusion	<ul style="list-style-type: none"> • Are sensitive to and inclusive of diverse needs and interests • Value diverse opinions and perspectives • Encourage participation of and facilitate access to services for marginalised and under-represented groups • Encourage inclusive behaviour amongst others
Flexibility and resilience	<ul style="list-style-type: none"> • Demonstrate flexibility in the face of change • Maintain professional behaviour under pressure • Demonstrate resilience when faced with difficulty
Respect and empathy	<ul style="list-style-type: none"> • Maintain a respectful attitude to others at all times • Listen and seek to understand others' views • Act with genuine concern for others

Demonstrating understanding of nutrition in humanitarian settings

Effectively working in nutrition in humanitarian contexts requires an understanding of how nutrition is affected by humanitarian crises, an understanding of the humanitarian sector and linkages with the development sector, and the ability to apply this specific knowledge to an operational context. It also requires a good knowledge of nutrition approaches, standards, guidelines and stakeholders and the ability to apply them in a professional context.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
1.1 Applying humanitarian principles and standards	<p>1.1.1 Demonstrate awareness of key humanitarian actors, standards, frameworks and regulations and how they apply</p> <p>1.1.2 Comply with humanitarian codes of conduct and uphold humanitarian principles in personal and professional contexts</p>	<p>1.1.3 Demonstrate understanding of humanitarian principles, actors, systems and standards and their implications for nutrition programmes in humanitarian contexts</p> <p>1.1.4 Ensure your own personal and professional conduct complies with humanitarian principles standards and frameworks and promote compliance amongst team members</p>	<p>1.1.5 Work within humanitarian structures to promote optimal nutrition outcomes across sectors in humanitarian contexts</p> <p>1.1.6 Create a culture of compliance with humanitarian principles and codes of conduct</p> <p>1.1.7 Ensure nutrition strategies and guidelines adhere to and promote humanitarian principles, standards and frameworks</p>
1.2 Applying nutrition approaches, standards and guidelines in humanitarian contexts	<p>1.2.1 Demonstrate understanding of the basic, underlying and immediate causes and consequences, features and symptoms of all forms of malnutrition</p> <p>1.2.2 Demonstrate awareness of how emergencies impact nutrition and factors that affect this including the pre-crisis nutritional context, cultural context, type of emergency</p> <p>1.2.3 Demonstrate awareness of key nutrition and nutrition in emergencies concepts, standards, guidelines and approaches and apply them appropriately in the context</p> <p>1.2.4 Ensure nutrition interventions adhere to all applicable legal, regulatory guidelines, policies and protocols</p>	<p>1.2.5 Apply understanding of the impact of emergencies on nutrition to design and operationalise nutrition programmes that are relevant to the situation and cultural context</p> <p>1.2.6 Demonstrate understanding of common obstacles to nutrition programming across all phases of emergencies and develop appropriate mitigation strategies</p> <p>1.2.7 Ensure programmes are designed and implemented in accordance with key nutrition and nutrition in emergencies standards and guidelines and regulatory frameworks</p> <p>1.2.8 Apply and adapt nutrition standards and approaches to ensure relevance for the context</p> <p>1.2.9 Ensure nutrition programmes adhere to all applicable legal, regulatory guidelines, policies and protocols</p>	<p>1.2.10 Apply understanding of the impact of emergencies on nutrition to develop programming guidance, influence policy development and support emergency preparedness planning at organisational, national or global level</p> <p>1.2.11 Provide technical advice on adapting guidance and common nutrition programming interventions to the specific humanitarian and cultural context, taking into account potential obstacles</p> <p>1.2.12 Contribute to the development and revision of nutrition in emergencies approaches, standards and guidelines based on evidence and emerging best practice</p> <p>1.2.13 Provide technical support and advice on how to contextualise and adapt approaches, standards and guidelines to specific contexts</p>
1.3 Demonstrating understanding of the impact of humanitarian-development linkages on nutritional outcomes	<p>1.3.1 Demonstrate understanding of the potential benefits and challenges to strengthening linkages between humanitarian and development sector actors and activities</p> <p>1.3.2 Identify ways to improve linkages between humanitarian and development activities within nutrition and other sectors</p> <p>1.3.3 Develop connections with ongoing or long-term programmes and services aimed at promoting nutrition</p> <p>1.3.4 Demonstrate understanding of the ways your work can contribute to building resilient systems, nutritional resilience of populations and emergency preparedness</p>	<p>1.3.5 Embed the emergency nutrition response within the context of ongoing activities aimed at promoting nutrition ensuring they are integrated with existing systems and services</p> <p>1.3.6 Build strong networks with humanitarian and development actors in nutrition and other sectors in order to more effectively reduce risk, vulnerability and overall levels of need</p> <p>1.3.7 Design sustainable nutrition programmes and interventions that build links across humanitarian and development activities and integrate with and strengthen existing systems and services</p>	<p>1.3.8 Develop partnerships from across the humanitarian and development sectors at national, regional and global levels</p> <p>1.3.9 Promote the importance of strengthening linkages between humanitarian and development actors</p> <p>1.3.10 Provide technical advice and support to identify and implement humanitarian-development linkages for nutrition</p> <p>1.3.11 Advocate for adopting multi-year timeframes into programming</p>

Measuring, monitoring and analysing the nutrition situation

Measuring, monitoring and analysing the nutritional situation involves systematically identifying what nutrition data is needed, what exists and what needs to be updated; collecting, analysing and interpreting nutrition data and information; and disseminating data and information to relevant stakeholders to support decision-making as required. This data and information should be kept up to date to reflect changes and identify emerging trends and should be used to inform programme design.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
<p>2.1 Planning and establishing a coordinated nutrition information system</p>	<p>2.1.1 Contribute to the definition of key nutrition indicators, data collection planning and the design of surveys, assessments and tools</p> <p>2.1.2 Support the contextualisation of monitoring and assessment tools to ensure they are culturally appropriate and easy to use</p> <p>2.1.3 Work with other local actors to coordinate and align data collection to avoid duplications and minimise gaps</p>	<p>2.1.4 Work with other key stakeholders to define key nutrition indicators to assess and monitor the nutrition situation</p> <p>2.1.5 Create a data collection plan and gender- and age-sensitive tools to collect primary and secondary, quantitative and qualitative data</p> <p>2.1.6 Ensure staff are able to use data collection tools accurately</p> <p>2.1.7 Collaborate with other actors to align methods, tools and indicators and design, plan and organise multi-sector assessments</p> <p>2.1.8 Integrate nutrition information systems, and emergency data collection, into existing health and nutrition information systems</p>	<p>2.1.9 Provide technical support to develop, establish and improve nutrition information systems that will support analysis of the changing situation and inform strategic and programmatic direction</p> <p>2.1.10 Ensure nutrition information systems are in line with applicable organisational and national strategies, guidelines, policies and ethical standards and coordinated with other actors</p> <p>2.1.11 Provide oversight to ensure nutrition information systems are being implemented accurately and effectively</p> <p>2.1.12 Contribute to the development and improvement of nutritional surveillance systems</p>
<p>2.2 Collecting, analysing and interpreting nutrition data</p>	<p>2.2.1 Collect and record good quality anthropometric and non-anthropometric data accurately using data collection tools, methods and growth charts accurately</p> <p>2.2.2 Adhere to all relevant data protection regulations, guidelines and protocols when collecting, handling and storing data</p> <p>2.2.3 Handle sensitive data confidentially</p> <p>2.2.4 Use nutrition information to inform the implementation of interventions</p>	<p>2.2.5 Organise, support and supervise the data collection teams to ensure data quality and adherence to guidelines and protocols</p> <p>2.2.6 Ensure all data handling and management adheres to relevant data protection guidelines and protocols</p> <p>2.2.7 Analyse and interpret assessment data to identify nutrition status and driving factors of malnutrition to inform decision-making about nutrition programmes</p> <p>2.2.8 Analyse data to identify early warning signs and emerging trends</p>	<p>2.2.9 Aggregate and analyse diverse datasets from multiple sources to identify systematic causes and consequences of malnutrition in a country or region</p> <p>2.2.10 Analyse and interpret data to make evidence-based recommendations for nutrition programmes and strategies</p> <p>2.2.11 Analyse and interpret early warning data and emerging trends to inform emergency preparedness</p>
<p>2.3 Communicating, disseminating and using data</p>	<p>2.3.1 Adhere to protocols on appropriate communication and dissemination of data and information</p> <p>2.3.2 Ensure all information and data that is shared maintains the dignity of affected populations and keep sensitive information confidential</p> <p>2.3.3 Share key findings from assessments with community members and relevant stakeholders in accessible and culturally appropriate formats in line with protocols</p>	<p>2.3.4 Establish guidelines for the appropriate communication and dissemination of data and information and ensure they are implemented</p> <p>2.3.5 Work with others to design and develop culturally appropriate and accessible information products for communicating useful information with a range of stakeholders</p> <p>2.3.6 Communicate nutrition information with a diverse range of stakeholders using accessible methods and platforms</p>	<p>2.3.7 Contribute to knowledge management through the production and dissemination of case studies, promising practices, lesson-learned documents</p> <p>2.3.8 Communicate nutrition information and recommendations with other actors to improve cooperation across the humanitarian response</p>

Identifying appropriate interventions

Improving nutritional outcomes in emergencies requires the identification of appropriate interventions for different population groups. This requires identifying the right intervention for the right target population by applying technical expertise and response options. Consideration should be given to addressing short-term humanitarian needs, building synergies with existing nutrition programmes and anticipating future needs. The full range of nutrition interventions includes those that directly and indirectly contribute to nutrition outcomes and those that can be delivered through the health sector and other sectors.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
<p>3.1 Identifying target populations and their nutrition needs</p>	<p>3.1.1 Contribute to the identification of populations' needs</p> <p>3.1.2 Use local and contextual knowledge to support prioritisation of target populations and needs</p>	<p>3.1.3 Use assessment data to identify and quantify target populations and their priority immediate and potential future needs and vulnerabilities</p> <p>3.1.4 Coordinate needs identification and prioritisation with other actors and sectors to minimise duplications, avoid gaps and build strong synergies with on-going programmes and services</p> <p>3.1.5 Actively seek out and incorporate community perspectives into prioritisation of populations and needs</p>	<p>3.1.6 Provide oversight and advice to support the identification of target populations and their immediate and potential future nutrition needs and vulnerabilities</p> <p>3.1.7 Define and adjust nutrition strategies based on identified needs and vulnerabilities</p> <p>3.1.8 Support the definition or revision of national priorities based on identified needs and vulnerabilities</p>
<p>3.2 Identifying appropriate interventions to meet target populations' identified needs</p>	<p>3.2.1 Demonstrate knowledge of available and appropriate, direct and indirect, nutrition interventions for preventing and treating malnutrition across the life cycle</p> <p>3.2.2 Contribute to the selection and adaptation of interventions for the cultural context</p>	<p>3.2.3 Demonstrate knowledge of the full range of direct and indirect nutrition interventions for preventing and treating malnutrition across the life cycle</p> <p>3.2.4 Identify the most appropriate interventions to meet target populations' needs based on their age-group, nutritional status and any additional nutritional needs</p> <p>3.2.5 Adapt the design of nutrition interventions to suit the cultural context</p> <p>3.2.6 Keep up to date with innovations in the design of nutrition interventions and approaches</p>	<p>3.2.7 Provide oversight and advice on the selection of appropriate direct and indirect nutrition interventions to meet identified needs of target populations in line with relevant organisational, national and global strategies and priorities and based on evidence</p> <p>3.2.8 Work with others across multiple sectors to develop and periodically revise guidelines and tools for effective implementation of nutrition interventions and approaches</p> <p>3.2.9 Identify new opportunities, approaches and interventions to improve nutrition outcomes based on research and analysis of data</p> <p>3.2.10 Use creative and innovative thinking to design new potential solutions to test</p>

Designing and managing nutrition programmes

Designing and managing nutrition programmes involves ensuring that programmes are effectively designed and implemented to ensure the assistance being provided can be accessed by all those that the intervention is aimed at, and that the required resources are secured and used effectively, efficiently and ethically, that programmes are monitored and adjustments made based on lessons learned. Programmes should be based on an understanding of the identified needs, organisational capacity and an awareness of on-going or other programmes to maximise coverage and impact and avoid duplications and gaps.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
<p>4.1 Designing and planning effective and accessible nutrition programmes</p>	<p>4.1.1 Contribute to the design of nutrition programmes that address identified needs of target populations</p> <p>4.1.2 Contribute ideas on ways to ensure programmes are accessible, locally and culturally appropriate and gender and age sensitive</p> <p>4.1.3 Work with other team members to develop implementation plans to deliver nutrition programmes</p>	<p>4.1.4 Design nutrition programmes to address identified needs with appropriate interventions, realistic timeframes and resourcing requirements</p> <p>4.1.5 Ensure nutrition programme design is informed by organisational capacities and in line with donor requirements</p> <p>4.1.6 Ensure programme design and planning take into account the diverse needs and vulnerabilities of affected populations, are locally and culturally appropriate, and gender and age sensitive</p> <p>4.1.7 Develop implementation plans collaboratively with teams</p>	<p>4.1.8 Provide oversight and technical advice to design programmatic activities including the development of a theory of change, implementation plans, programme timelines, staffing structures and required budgets</p> <p>4.1.9 Ensure programme design is in line with organisational, national and global strategies on the prevention and treatment of malnutrition</p> <p>4.1.10 Lead on the design and set up of large-scale emergency nutrition responses</p>
<p>4.2 Mobilising and using resources</p>	<p>4.2.1 Implement interventions in line with plans in a cost-effective way</p> <p>4.2.2 Contribute to recruitment, induction and supervision of nutrition front-line workers according to implementation plans</p> <p>4.2.3 Follow systems for monitoring and replenishing nutrition supplies</p> <p>4.2.4 Demonstrate commitment to ethical and efficient use of all resources</p> <p>4.2.5 Use nutrition programme resources as intended, following procurement guidelines and maintaining accurate records of expenditures, nutrition supplies and assets</p>	<p>4.2.6 Identify funding opportunities, build relationships with national level donors and develop funding applications to secure funds for nutrition programmes</p> <p>4.2.7 Maintain oversight of nutrition programme budgets, monitor expenditures and contribute to financial reports</p> <p>4.2.8 Ensure nutrition programmes are delivered by sufficient and competent team members working with HR specialists to develop and implement recruitment, development and retention plans</p> <p>4.2.9 Develop and implement procurement and stock monitoring plans in coordination with logisticians</p> <p>4.2.10 Establish and implement systems for effective and ethical use of resources for nutrition programmes and act on any misuse</p>	<p>4.2.11 Build strategic relationships with donors at national and global level and take action to understand and influence their funding priorities</p> <p>4.2.12 Provide technical support and advice for the development of funding applications for nutrition programmes</p> <p>4.2.13 Provide technical support and advice to support the recruitment, development and retention of nutrition experts</p> <p>4.2.14 Oversee the development and implementation of procurement plans ensuring efficient and timely procurement of supplies</p> <p>4.2.15 Develop and implement organisational policies and guidance on ethical and efficient use of resources</p>

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
<p>4.3 Monitoring, evaluating and adapting nutrition programmes</p>	<p>4.3.1 Maintain accurate records on activities</p> <p>4.3.2 Gather monitoring and evaluation data according to the monitoring and evaluation plan</p> <p>4.3.3 Ensure meaningful participation of community members in monitoring and evaluation activities</p> <p>4.3.4 Create accurate reports using correct formats</p> <p>4.3.5 Provide feedback to community members on results of evaluations</p> <p>4.3.6 Use feedback to identify adjustments and improvements to programme activities</p> <p>4.3.7 Agree, plan and implement adjustments to activities</p>	<p>4.3.8 Design, develop and establish a contextually relevant monitoring and evaluation framework, plan and tools for the nutrition programmes</p> <p>4.3.9 Ensure data is collected in line with the monitoring and evaluation plan and address gaps or inaccuracies in data collection</p> <p>4.3.10 Systematically analyse programme data and information against key indicators to evaluate nutrition programme</p> <p>4.3.11 Create reports and lessons learned documents in a range of formats suitable for different audiences</p> <p>4.3.12 Use monitoring and evaluation data to identify programme adjustments and seek agreement for adjustments with relevant stakeholders</p> <p>4.3.13 Operationalise adjustments and improvements to the programme plan in a timely manner</p>	<p>4.3.14 Provide technical support for the development of monitoring and evaluation frameworks and tools, ensuring alignment with organisational strategies and key reporting requirements</p> <p>4.3.15 Provide technical support and quality control for the development of reports to key stakeholders</p> <p>4.3.16 Design and conduct research and use monitoring and evaluation data from nutrition programmes to create lessons learned and evidence-based recommendations</p> <p>4.3.17 Work with other stakeholders including state actors to make adjustments to policy and guidelines based on lessons learned and monitoring and evaluation data</p>

Adopting integrated and systems-based approaches to nutrition programming

Adopting an integrated and systems-based approach to programming involves building linkages with actors across sectors to integrate programmes that directly address nutrition outcomes into food security, health, water and sanitation, education and social protection systems, and supporting interventions that indirectly contribute to nutrition outcomes by addressing enabling and underlying causes of nutrition. The approach draws on an understanding of the enabling, underlying and immediate determinants of all forms of malnutrition and knowledge of food security, health, water and sanitation, education and social protection systems, services and actors. It requires the ability to view nutrition within the broader context of the needs of affected populations and the systems that can support them more sustainably.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
<p>5.1 Designing and implementing nutrition programmes that are integrated across sectors and into existing systems</p>	<p>5.1.1 Demonstrate understanding of the impact and importance of delivering nutrition interventions through existing systems and services and alongside actors in other sectors</p> <p>5.1.2 Identify and map food security, health, water and sanitation, education and social protection services and actors in the local area</p> <p>5.1.3 Identify opportunities for implementing nutrition interventions through existing services</p> <p>5.1.4 Contribute ideas using local and contextual knowledge to support integrated programming throughout the nutrition programme cycle</p>	<p>5.1.5 Build own knowledge of existing food, health, water and sanitation, education and social protection systems and actors</p> <p>5.1.6 Identify and develop opportunities for building linkages with actors in other sectors and for integrating nutrition interventions into existing services</p> <p>5.1.7 Work collaboratively with actors in other sectors to design and implement integrated needs assessments, programmes and advocacy initiatives working through existing systems whenever possible</p> <p>5.1.8 Build capacity of others to implement nutrition programmes and advocacy activities that are integrated into existing systems and services</p>	<p>5.1.9 Generate and champion strategies that incorporate systems-based approaches, build cross-sectoral linkages and support integrated policy and practice</p> <p>5.1.10 Develop and promote best practice guidance and quality benchmarks on integrating nutrition interventions into existing systems and working across sectors</p> <p>5.1.11 Provide technical advice and guidance on building cross-sectoral linkages and integrating nutrition programmes into existing systems</p> <p>5.1.12 Build networks and partnerships with key stakeholders to establish strong strategic linkages across sectors</p> <p>5.1.13 Influence partners and key stakeholders to incorporate integrated approaches into nutrition strategies, programmes and advocacy</p>
<p>5.2 Supporting interventions that indirectly contribute to nutrition outcomes</p>	<p>5.2.1 Work collaboratively with actors across sectors to identify ways to integrate activities that address underlying and enabling causes of nutrition into health, food security, water and sanitation, education and social protection programmes</p> <p>5.2.2 Build networks with actors across sectors to promote cross-sectoral working and information sharing</p>	<p>5.2.3 Encourage and promote the integration of activities that address underlying and enabling causes of nutrition into health, food security, water and sanitation, education and social protection programmes</p> <p>5.2.4 Build networks and partnerships with actors across sectors to promote approaches that address underlying and enabling causes of nutrition</p>	<p>5.2.5 Gather evidence, identify and share current and emerging best practice on integrating interventions that indirectly contribute to nutrition outcomes into health, food security, water and sanitation, education and social protection strategies</p> <p>5.2.6 Build strategic links with actors across sectors to promote approaches that address underlying and enabling causes of nutrition</p>

Engaging communities for nutrition action

Adopting a community-centred approach can positively impact the nutritional status of specific target groups as well as populations as a whole. It can be a powerful tool for addressing need, reaching the most vulnerable, encouraging behaviour change and ensuring accountability. A community-centred approach encourages and supports the meaningful participation of a diverse range of community members, effectively mobilises community action on nutrition and empowers communities to lead and take ownership of activities. It ensures that decisions taken throughout the humanitarian programme cycle involve community members, and that feedback, concerns and complaints from community members are heard and acted upon.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
<p>6.1 Ensuring meaningful community participation and leadership</p>	<p>6.1.1 Engage a wide range of community members in planning, implementing and monitoring nutrition activities</p> <p>6.1.2 Ensure that the implementation of activities addresses community perspectives, preferences and potential barriers to services and activities</p> <p>6.1.3 Engage with community members through a range of pre-existing and culturally appropriate local platforms and mechanisms</p>	<p>6.1.4 Systematically support the participation of community members in decision making at all stages of the programme cycle</p> <p>6.1.5 Work collaboratively with community members to design and plan nutrition programmes</p> <p>6.1.6 Take actions to reduce barriers to participation and services for community members</p>	<p>6.1.7 Systematically support the incorporation of community perspectives in decision-making related to nutrition strategies, policies and guidelines</p> <p>6.1.8 Promote local civil society strengthening and community leadership in nutrition programme design and implementation</p> <p>6.1.9 Promote community participation in decision-making at strategic level amongst partners and other stakeholders</p> <p>6.1.10 Identify and address systemic barriers to community participation and leadership</p>
<p>6.2 Mobilising community action on nutrition</p>	<p>6.2.1 Provide accessible and appropriate information on available services and how to access them</p> <p>6.2.2 Implement social and behavioural change sessions, activities and media campaigns to promote the adoption of healthy and protective behaviours among at-risk and affected populations</p> <p>6.2.3 Work with water and sanitation actors to implement health and hygiene promotion activities which contribute to improved nutrition</p> <p>6.2.4 Support caregivers and communities to identify and refer people requiring nutritional or medical care</p> <p>6.2.5 Form partnerships with local organisations, including civil society and private sector organisations, to support and encourage community engagement and facilitate the dissemination of nutrition messages at local level</p>	<p>6.2.6 Incorporate community mobilisation, including social and behaviour change activities, into nutrition programming</p> <p>6.2.7 Work collaboratively with actors from food security, water and sanitation and health systems to ensure social and behaviour change messages address determinants of nutrition consistently</p> <p>6.2.8 Oversee the implementation of community mobilisation activities</p> <p>6.2.9 Form partnerships with civil society, consumer and private-sector groups to support and encourage community engagement and facilitate the dissemination of nutrition messages at the national level</p>	<p>6.2.10 Provide technical support and guidance on how to implement effective community mobilisation activities and ensure that communities are part of project design</p> <p>6.2.11 Support the scale-up of community-based interventions that address malnutrition</p> <p>6.2.12 Incorporate community mobilisation into strategies and guidelines for nutrition programming drawing on up-to-date research and evidence</p> <p>6.2.13 Provide cross-sectoral leadership to ensure community mobilisation strategies are holistic and in-line with latest available evidence on key determinants</p>

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
<p>6.3 Working accountably with communities and affected populations</p>	<p>6.3.1 Share information about individuals' rights and entitlements and expected standards of conduct by staff and volunteers</p> <p>6.3.2 Ensure own behaviour is in line with all applicable codes of conduct, ethical standards and Prevention of Sexual Exploitation and Abuse standards</p> <p>6.3.3 Implement safe, accessible and confidential complaint and feedback mechanisms</p> <p>6.3.4 Systematically collect and use feedback to inform implementation of nutrition activities</p>	<p>6.3.5 Ensure that accountability to beneficiaries is a core element and success indicator for nutrition programme activities</p> <p>6.3.6 Establish and manage a feedback and response mechanism to gather feedback and complaints on nutrition programming and staff and volunteer conduct</p> <p>6.3.7 Use community feedback to adjust nutrition programme design and implementation</p> <p>6.3.8 Address or refer feedback, complaints or allegations professionally, in a timely manner, in line with codes of conduct and prevention of sexual exploitation and abuse protocols</p> <p>6.3.9 Take actions to prevent and act on unintended negative effects of programmes</p> <p>6.3.10 Hold self and team members to account for their actions and act in a timely manner on allegations</p>	<p>6.3.11 Ensure effective accountability systems are in place and being implemented</p> <p>6.3.12 Create an organisational culture that is open to feedback, continual learning and improvement</p> <p>6.3.13 Use community feedback to improve nutrition strategies, policies and guidelines</p> <p>6.3.14 Establish and implement procedures to identify and act on potential and actual harmful actions and unintended negative effects of programmes</p> <p>6.3.15 Work across organisations to ensure systematic sharing of information on complaints and allegations</p>

Coordinating and collaborating with others

Adopting a coordinated and collaborative approach when working with others in the nutrition sector and beyond, and when forming partnerships, improves the effectiveness and efficiency of nutrition programmes by minimising gaps and avoiding duplications and supports the integration of nutrition across systems and sectors. Coordination can be achieved through formal and informal mechanisms and requires a pro-active and collaborative approach to working with others.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
<p>7.1 Communicating and sharing information</p>	<p>7.1.1 Effectively communicate with stakeholders in your own and other organisations, sharing relevant information about programmes, activities and services in adherence with organisational guidelines and communications plans</p> <p>7.1.2 Listen to the perspectives of other stakeholders and affected populations</p> <p>7.1.3 Tailor message and communication approach to the audience and purpose</p> <p>7.1.4 Demonstrate a commitment to transparency in your work</p>	<p>7.1.5 Work with team members to design and implement a communications plan</p> <p>7.1.6 Disseminate appropriate and useful information to relevant stakeholders on a timely basis and in an accessible manner</p> <p>7.1.7 Pro-actively seek out information from other stakeholders and use it to inform programming decisions</p> <p>7.1.8 Model a commitment to transparent information sharing and encourage transparency amongst others</p>	<p>7.1.9 Effectively communicate with key stakeholders across all sectors</p> <p>7.1.10 Share relevant, strategic information in accessible formats</p> <p>7.1.11 Create a culture of transparency and learning within own organisation and with other actors</p>
<p>7.2 Coordinating with others</p>	<p>7.2.1 Attend and actively participate in relevant local or area-based coordination meetings</p> <p>7.2.2 Encourage local stakeholders to participate in coordination meetings</p> <p>7.2.3 Work with relevant local authorities, stakeholders and partners to coordinate plans and implementation of activities and assessments to avoid duplication and minimise gaps</p> <p>7.2.4 Coordinate own work and priorities with team members</p>	<p>7.2.5 Attend and actively engage with coordination platforms and meetings including cluster or sector meetings</p> <p>7.2.6 Encourage partners to engage with coordination structures and take actions to reduce barriers to participation in coordination meetings</p> <p>7.2.7 Engage in collective sector planning processes including coordinated needs assessment and analysis, nutrition response plan development and implementation and nutrition response monitoring</p> <p>7.2.8 Pro-actively reach out to other actors to coordinate activities when possible in order to reduce duplication and minimise gaps</p>	<p>7.2.9 Actively participate and provide leadership in coordination and inter-sector platforms and meetings including cluster or sector meetings</p> <p>7.2.10 Reach out to other actors to coordinate strategies, priorities, approaches, research and initiatives to improve the nutrition environment</p> <p>7.2.11 Take into account the concerns and interests of partners and other key stakeholders when taking strategic decisions</p>
<p>7.3 Engaging, connecting and partnering with others</p>	<p>7.3.1 Build strong networks with a wide range of local stakeholders</p> <p>7.3.2 Identify suitable local partnerships based on comparative advantage in order to improve the implementation of nutrition activities</p>	<p>7.3.3 Build strong networks with a wide range of local and national stakeholders across multiple sectors</p> <p>7.3.4 Form partnerships with local, national and international stakeholders to improve the implementation of nutrition programmes</p>	<p>7.3.5 Build strategic alliances through effective networking with a wide range of stakeholders inside the sector and within other sectors</p> <p>7.3.6 Form partnerships at national and global level to drive strategic and systemic change to improve nutrition outcomes</p>

Advocating for improved nutrition outcomes

Advocating for improved nutritional outcomes, and for the nutrition sector overall, involves influencing the actions of others in order to create an environment that supports nutritional health. This involves delivering powerful and coordinated advocacy messages to influence decision-makers at different levels to take actions to improve nutritional outcomes and to support better understanding of the nutrition sector. It can involve influencing the policies, strategies and activities of a range of actors including state and non-state, private and public sector actors and can involve work at grass-roots, local, national or international levels depending on the context and scope of your role.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
8.1 Identifying advocacy allies and targets	8.1.1 Build a network of advocacy allies with influence in the local area 8.1.2 Identify key advocacy targets whose actions may impact nutrition outcomes in the local area	8.1.3 Build a network of advocacy allies with influence at national level 8.1.4 Identify key advocacy targets whose actions may impact the success and outcomes of nutrition programmes	8.1.5 Build a network of advocacy allies with influence at strategic and global level 8.1.6 Identify key advocacy targets whose actions and decisions may impact nutrition outcomes at systemic, strategic or global level
8.2 Developing advocacy plans and messages	8.2.1 Develop locally appropriate advocacy messages and tools that are in line with relevant advocacy plans and strategies 8.2.2 Work with advocacy allies to ensure advocacy messages and activities are consistent 8.2.3 Ensure all advocacy messages incorporate the views of the community and maintain the dignity of affected populations	8.2.4 Design advocacy plans, messages and tools that are in line with relevant global, regional or organisational nutrition advocacy strategies 8.2.5 Collaborate with advocacy allies to ensure consistent messaging, align advocacy plans to increase the impact and effectiveness of advocacy messaging 8.2.6 Ensure all advocacy plans, messages and tools incorporate the views of the community and conform to ethical and confidentiality standards	8.2.7 Lead the development of national and regional nutrition advocacy strategies to influence policy and contribute to improvements at strategic and systemic levels ensuring that learning is captured to inform future advocacy work 8.2.8 Contribute to the formulation of joint global approaches to improving nutrition outcomes 8.2.9 Ensure nutrition advocacy strategies reflect the views of the community 8.2.10 Develop guidelines and establish processes for ensuring advocacy activities conform to ethical standards and maintain the dignity of affected populations
8.3 Influencing and persuading	8.3.1 Communicate key nutrition messages with community members and locally relevant stakeholders to positively impact behaviour change	8.3.2 Communicate key nutrition messages to positively impact nutrition programmes and nutrition outcomes at national level	8.3.3 Confidently and persuasively communicate with key strategic and influential stakeholders to influence policy development to improve nutritional outcomes 8.3.4 Hold decision makers to account for national and global goals and targets for nutrition

Promoting resilience to shocks

Promoting resilience increases communities' ability to cope with, adapt to and recover from shocks that negatively impact nutrition status. Community resilience can be strengthened through activities that promote sustainable livelihoods and diets, limit dependencies and negative coping strategies and through the strengthening of emergency preparedness and social protection systems.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
9.1 Promoting household and community resilience	9.1.1 Implement activities that avoid creating dependencies and support and promote household and community livelihoods and access to markets 9.1.2 Work collaboratively with affected communities to identify positive and limit negative coping strategies that may impact future nutrition status 9.1.3 Take steps to ensure the implementation of activities avoids negative impacts on the environment	9.1.4 Incorporate approaches and activities into nutrition programmes that promote early disaster recovery, benefit the local economy and support sustainable diets 9.1.5 Incorporate actions into nutrition programmes to limit and mitigate negative coping strategies that impact nutritional status, health and well-being 9.1.6 Incorporate strategies to minimise negative environmental impact into nutrition programme design	9.1.7 Document, generate and disseminate evidence on approaches that promote sustainable approaches and local capacities 9.1.8 Plan a transition or exit strategy in the early stages of the humanitarian programme 9.1.9 Ensure strategies, policies and guidelines include approaches to prevent negative coping strategies 9.1.10 Promote and provide technical guidance to support nutrition programming that minimises negative environmental impact
9.2 Strengthening health and social protection systems	9.2.1 Promote and support activities to strengthen the resilience to shocks of health and social protection systems 9.2.2 Promote and support activities to strengthen local social safety nets that will positively impact nutrition outcomes 9.2.3 Take actions to improve community awareness of and access to social safety nets and social protection systems	9.2.4 Work collaboratively with actors across sectors to identify activities that strengthen the resilience of health and social protection systems and social safety nets 9.2.5 Design and operationalise nutrition programmes that strengthen the resilience to shocks of health and social protection systems and social safety nets in order to positively impact nutrition outcomes	9.2.6 Develop strategies to promote and strengthen health and social protection systems and social safety nets through nutrition programmes 9.2.7 Develop evidence-based guidelines on the impact of social protection systems on the protection and promotion of nutrition outcomes 9.2.8 Promote and provide technical guidance on establishing and strengthening social protection systems and policies at national level
9.3 Strengthening emergency preparedness systems	9.3.1 Participate in environment and risk analysis activities and emergency preparedness planning linked to nutritional status, ensuring they are relevant to the local context 9.3.2 Use risk analysis to ensure the implementation of activities avoids negative impacts on the environment 9.3.3 Implement activities outlined in emergency preparedness plans	9.3.4 Work collaboratively with other stakeholders, including community members, to conduct environmental and climate risk analysis linked to nutritional status and develops emergency preparedness plans 9.3.5 Use risk analysis findings to inform nutrition programme design and implementation 9.3.6 Monitor early warning signs to inform programming decisions	9.3.7 Provide technical support to incorporate nutrition into environmental and climate risk analysis 9.3.8 Provide strategic guidance on incorporating nutrition into emergency preparedness plans 9.3.9 Ensure nutrition strategies, policy and guidelines are informed by environmental and climate risk analysis and emergency preparedness plans 9.3.10 Monitor early warning signs to inform strategic decision making

Strengthening capacities to protect, promote and support nutrition

Utilising and strengthening capacities of individuals, organisations, institutions and systems in order to support sustainable improvements in nutrition outcomes is a core component of working in nutrition in humanitarian contexts. It involves identifying existing capacities and utilising and strengthening these as well as addressing capacity gaps when they exist. It requires avoiding activities or ways of working which inadvertently ignore or reduce existing capacities and which reinforce harmful power dynamics. It is based on a commitment to continuous learning for personal growth and organisational development.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
<p>10.1 Utilising and strengthening individual capacities</p>	<p>10.1.1 Reflect on and take actions to build own capacities</p> <p>10.1.2 Identify and utilise capacities of community members, mobilisers and volunteers</p> <p>10.1.3 Identify areas in need of strengthening amongst community members, mobilisers and volunteers</p> <p>10.1.4 Strengthen capacity of community members, mobilisers and volunteers through information sharing, training and coaching as appropriate</p>	<p>10.1.5 Demonstrate personal commitment to individual growth</p> <p>10.1.6 Assess capacities of individuals working in internal nutrition teams and partners</p> <p>10.1.7 Develop a capacity building plan based on identified capacity development needs of individuals</p> <p>10.1.8 Use a range of formal and informal means to utilise and develop the capacity of individuals</p>	<p>10.1.9 Create an organisational culture that supports the recognition and development of individual capacities</p> <p>10.1.10 Incorporate capacity development of individuals into organisational strategies and resourcing plans</p> <p>10.1.11 Provide technical expertise to support the development and implementation of capacity building initiatives for individuals</p> <p>10.1.12 Support the recruitment and retention of nutrition specialists and team members</p>
<p>10.2 Strengthening organisational capacity</p>	<p>10.2.1 Contribute to the establishment and strengthening of systems and processes within own organisation</p> <p>10.2.2 Maintain appropriate records to support and build institutional memory</p> <p>10.2.3 Support organisational capacity strengthening of your own and partner organisations through the sharing of information, resources and tools</p> <p>10.2.4 Encourage and support downstream partners to engage in capacity strengthening initiatives</p>	<p>10.2.5 Collaboratively identify organisational capacities, gaps and comparative advantages of your own and partner organisations</p> <p>10.2.6 Work with partners to identify methods for strengthening capacities of your own and partner organisations</p> <p>10.2.7 Take actions to strengthen systems, processes and institutional memory of own organisation</p> <p>10.2.8 Provide support to partners to address identified organisational capacity building needs</p> <p>10.2.9 Pro-actively seek to learn from partner organisations</p>	<p>10.2.10 Incorporate organisational learning reviews and processes into strategies and plans</p> <p>10.2.11 Provide technical expertise to support the development and implementation of organisational capacity building assessments and plans to support improved delivery of nutrition programmes</p>
<p>10.3 Strengthening institutional, systemic and governance capacities</p>	<p>10.3.1 Work with and through existing systems whenever possible</p> <p>10.3.2 Strengthen linkages with existing local services</p> <p>10.3.3 Engage with local decision-making structures when planning interventions</p> <p>10.3.4 Implement activities to strengthen the capacities of existing health-care systems, services and staff</p>	<p>10.3.5 Ensure nutrition programmes link into existing local and national systems and services whenever possible</p> <p>10.3.6 Develop strong networks with a wide range of actors of different types to improve linkages and collaborations across sectors and organisations</p> <p>10.3.7 Design and implement activities to strengthen the capacity of existing health-care systems, services and staff</p>	<p>10.3.8 Provide technical expertise and leadership to support the integration of nutrition programming into existing local and national systems</p> <p>10.3.9 Provide technical expertise and leadership to support the development and strengthening of national nutrition emergency response, preparedness and contingency plans and structures</p> <p>10.3.10 Support policy development at national and global level</p>

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
<p>10.4 Championing and strengthening local and national capacity</p>	<p>10.4.1 Identify and champion local capacity to implement and support nutrition interventions</p> <p>10.4.2 Identify, challenge and work to remove barriers to participation for local organisations</p> <p>10.4.3 Support and promote capacity strengthening initiatives for local organisations</p>	<p>10.4.4 Recognise and promote local and national capacity to lead and deliver nutrition programmes</p> <p>10.4.5 Support local and national organisations to participate in decision-making and coordination of nutrition programming and work to remove barriers</p> <p>10.4.6 Support and promote localisation and capacity strengthening initiatives</p> <p>10.4.7 Design and implement activities to strengthen the capacity of national state and non-state actors to lead and implement emergency nutrition programmes</p>	<p>10.4.8 Ensure promotion, documentation and dissemination of nutrition programming achievements</p> <p>10.4.9 Systematically record and celebrate contributions of local and national organisations</p> <p>10.4.10 Pro-actively support increased national and local representation in decision making platforms and take steps to remove systemic barriers</p> <p>10.4.11 Provide technical expertise for localisation and capacity strengthening initiatives</p>

Promoting access to nutritious diets

Ensuring healthy food environments and access to nutritious diets is fundamental to supporting good nutrition. This involves working with food systems, actors and suppliers to protect and improve access to nutritious diets that are affordable and sustainable; providing support to households in the form of food or cash and voucher assistance when their access to affordable, nutritious food is compromised; and providing food assistance to nutritionally vulnerable groups targeted for interventions that prevent the deterioration of nutrition status.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
11.1 Working with food systems to protect and improve access to nutritious diets	11.1.1 Demonstrate understanding of the central role of the food system in providing nutritious, safe, affordable and sustainable diets, nutrition services and supporting nutrition practices	11.1.2 Work collaboratively with food security actors to implement programmes that directly and indirectly contribute to improved nutrition outcomes 11.1.3 Design nutrition programmes that promote healthy food environments and improve access to nutritious diets	11.1.4 Work collaboratively with governments to create policies that promote healthy food environments and access to affordable nutritious foods 11.1.5 Promote the development and establishment of standards for food production, labelling and marketing and for fortification of foods 11.1.6 Advocate with producers and suppliers to comply with food production, labelling and marketing best practice and guidelines
11.2 Implementing general food distributions and cash/ voucher transfers	11.2.1 Demonstrate understanding of the benefits and purpose of general food distributions and cash/ voucher transfers 11.2.2 Implement food distributions and cash/ voucher transfers taking into account the local and cultural context 11.2.3 Implement actions to mitigate potential challenges that may arise during distributions and transfers	11.2.4 Articulate benefits, challenges and purposes of different interventions to improve nutrition across populations 11.2.5 Design, plan and manage general food distributions and cash/ voucher transfers 11.2.6 Supervise distributions and transfers to ensure they are carried out effectively 11.2.7 Identify and make plans to mitigate potential challenges that may arise during food distributions and cash/ voucher transfers	11.2.8 Provide technical support and advice for food distributions and cash/voucher transfers 11.2.9 Produce and update guidelines on effective implementation of food distributions and cash/ voucher transfers, and adaptation to local and cultural contexts 11.2.10 Collect and review evidence to identify best practice and innovations for improving the effectiveness of distributions 11.2.11 Promote cash assistance as a modality to improve nutrition outcomes
11.3 Implementing blanket supplementary feeding programmes	11.3.1 Demonstrate understanding of the purpose and benefits of blanket supplementary feeding programmes for at risk groups 11.3.2 Implement blanket supplementary feeding programmes taking into account any relevant local and cultural factors 11.3.3 Implement actions to mitigate potential challenges that may arise during distributions	11.3.4 Articulate the purpose and benefits of blanket supplementary feeding programmes for at risk groups 11.3.5 Design, plan and manage blanket supplementary feeding programmes taking into account any relevant local and cultural factors 11.3.6 Supervise blanket supplementary feeding distributions to ensure they are carried out effectively 11.3.7 Identify and make plans to mitigate potential challenges that may arise from blanket supplementary feeding programmes	11.3.8 Provide technical support and advice to Nutrition teams and other humanitarian stakeholders on when and how to undertake blanket supplementary feeding programmes 11.3.9 Produce and update guidelines on effective implementation of blanket supplementary feeding programmes and adaptation to local and cultural contexts 11.3.10 Collect and review evidence to identify best practice and innovations for improving the effectiveness of distributions

Protecting and supporting infant and child nutrition

Infants, children up to age two and children from age three to age five have specific nutritional needs and vulnerabilities that require targeted approaches. In order to support optimal nutrition, growth and development and to improve survival chance, it is essential to work closely with mothers, caregivers and community members to promote and protect appropriate and adequate feeding of infants up to age six months, young children up to age two and children up to age five. Those whose work focuses on infants, young children up to age two and children up to age five need a high-level of proficiency in this domain; however, the domain is not restricted to specialists alone and is important for all of those working in Nutrition in Humanitarian contexts. Being proficient in this domain relies on a high level of familiarity with the global guidance which includes: the International Code, World Health Assembly recommendations, the Operational Guidance on Infant and Young Child Feeding in Emergencies and global guidance and recommendations on infant feeding in emergencies in the context of HIV and other infectious diseases as well as applicable organisational and national guidelines.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
12.1 Demonstrating understanding of nutrition in infants, children under two and children under five	12.1.1 Articulate the key nutrition needs, vulnerabilities and drivers of malnutrition in infants up to six months, young children up to age two and children under age five 12.1.2 Describe and explain the benefits of recommended feeding and care practices in infancy and early childhood including breastfeeding in infants, complementary feeding for children under two years of age, adequate food and feeding practices for children under five and providing micronutrient supplementation and deworming in areas of need 12.1.3 Demonstrate understanding of the central importance of the Operational Guidance on Infant and Young Child Feeding in Emergencies and the International Code of Marketing of Breastmilk Substitutes 12.1.4 Demonstrate awareness and understanding of all applicable guidance, recommendations and codes	12.1.5 Provide clear leadership and guidance to teams and partners on the rationale for complying with applicable international, organisational, national guidelines, recommendations and codes and in particular the Operational Guidance on Infant and Young Child Feeding in Emergencies and the International Code of Marketing of Breastmilk Substitutes 12.1.6 Ensure teams understand and adhere to all applicable guidance, recommendations and codes 12.1.7 Ensure programmes are designed and implements in line with all applicable guidance, recommendations and codes	12.1.8 Develop and disseminate guidance and tools to support the implementation of infant and young child feeding practices in line with applicable international, organisational and national guidelines including the Operational Guidance on Infant and Young Child Feeding in Emergencies and the International Code of Marketing of Breastmilk Substitutes and related national policies and plans 12.1.9 Ensure strategies are in line with applicable guidance, recommendations and codes
12.2 Protecting, promoting and supporting age-appropriate, and adequate feeding and care for infants, children under two and children under five	12.2.1 Raise awareness amongst mothers and caregivers of recommended feeding and care practices in infancy, young childhood up to age two, and childhood up to age five 12.2.2 Provide support to mothers and caregivers for breastfeeding and complementary feeding 12.2.3 Provide support to mothers and caregivers for appropriate artificial feeding of infants in exceptional circumstances taking measures to minimise the risks 12.2.4 Challenge common myths, misconceptions and harmful feeding practices for infants and young children	12.2.7 Design and operationalise programmes that include contextually appropriate activities to protect, promote and support appropriate feeding practices for infants, young children up to age two, and childhood up to age five 12.2.8 Seek to integrate nutrition programmes for infants and children with local health services whenever possible 12.2.9 Provide technical support and guidance to staff and volunteers to support implementation of activities 12.2.10 Incorporate activities into programmes that monitor and report harmful feeding practices including the promotion of breastmilk substitutes	12.2.12 Systematically collect and review evidence on appropriate feeding practices to inform best practice and identify innovations in programming 12.2.13 Contribute to the development and revision of policy, plans and strategy guidance on appropriate infant and young child feeding practices for infants and young children at organisational, national or global level 12.2.14 Systematically gather evidence to counter myths and misconceptions on feeding practices and develop guidance and tools to address these

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
	<p>12.2.5 Monitor, report and challenge the promotion of breastmilk substitutes and other milk products to mothers, caregivers and communities</p> <p>12.2.6 Support local health care providers to deliver breastfeeding and complementary feeding support</p>	<p>12.2.11 Ensure staff and volunteers are following guidelines on artificial feeding and the distribution and use of breastmilk substitutes and other milk products</p>	<p>12.2.15 Work with key state and non-state actors to develop and improve policies and national guidelines to regulate the promotion of breastmilk substitutes, to raise awareness of adequate infant and child feeding practices amongst health care workers and to implement the Operational Guidance on Infant and Young Child Feeding in Emergencies</p>
<p>12.3 Managing at risk mothers and infants under 6 months</p>	<p>12.3.1 Demonstrate understanding of the interdependences between infants and their mothers or care givers and the importance of assessing and treating them together</p> <p>12.3.2 Use standard tools to assess feeding practices and nutritional status, health and well-being of mothers and infants</p> <p>12.3.3 Use assessment information to provide support or make referrals as appropriate</p>	<p>12.3.4 Design programmes and establish procedures for assessing and treating at risk mothers and infants together</p> <p>12.3.5 Provide technical guidance to teams on implementing interventions and tools to assess and treat at risk mothers and infants</p> <p>12.3.6 Promote the approach with partners and other stakeholders</p>	<p>12.3.7 Systematically collect and review evidence on the effectiveness of the approach in different contexts</p> <p>12.3.8 Present evidence and provide technical guidance for updating and adapting policy and guidelines at national or global level</p> <p>12.3.9 Support the development and roll out of tools to implement the approach</p>

Protecting nutrition in middle childhood and adolescence

Children in middle childhood, from age five to nine, through to adolescence, aged ten to nineteen, have specific nutritional needs and vulnerabilities that require targeted approaches to address nutritional needs arising from periods of growth and development and to promote appropriate feeding practices. Children and adolescents in this age bracket may benefit from improved access to nutritious food, to increased knowledge of optimal nutrition and access to specific supplements arising from their physical development. This competency domain is important for people with a specific focus on this age group as well as for others working in nutrition in humanitarian contexts.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
<p>13.1 Demonstrating understanding of nutrition in children and adolescents</p>	<p>13.1.1 Articulate the key nutrition needs, vulnerabilities and drivers of malnutrition in children and adolescents</p> <p>13.1.2 Describe and explain the benefits of specific interventions for children and adolescents including raising awareness of nutrition and healthy eating habits and providing micronutrient supplements</p>	<p>13.1.3 Ensure teams and partners understand the needs, vulnerabilities and drivers of malnutrition in children and adolescents and the key interventions for prevention and treatment</p> <p>13.1.4 Ensure teams implement activities in adherence with best practice</p>	<p>13.1.5 Develop and disseminate guidance and tools to support the implementation of programmes to support nutrition status of children and adolescents in humanitarian contexts</p>
<p>13.2 Promoting and protecting childhood and adolescent nutrition</p>	<p>13.2.1 Demonstrate understanding of the benefits of working with and through education and youth support systems to promote nutrition in children and adolescents</p> <p>13.2.2 Work collaboratively with schools to deliver interventions to support good diets, nutrition and hygiene practices</p> <p>13.2.3 Identify and engage with youth support systems, including formal and informal clubs and associations, to promote nutrition amongst children and adolescents</p> <p>13.2.4 Use a range of traditional and emerging media platforms to promote and share age-appropriate messages around nutrition targeting children and adolescents</p> <p>13.2.5 Identify ways to reach and promote nutrition amongst out of school children that are age appropriate and relevant to the local context</p>	<p>13.2.6 Work collaboratively with education and youth support services and schools to design and plan nutrition programmes that promote and protect childhood and adolescent nutrition</p> <p>13.2.7 Provide technical guidance and support to teams on implementing interventions to promote nutrition in childhood and adolescence</p> <p>13.2.8 Design age-appropriate nutrition information campaigns targeting children and adolescents and select appropriate traditional and social media platforms for dissemination</p> <p>13.2.9 Promote improving coverage of nutrition programmes for children and adolescents</p>	<p>13.2.10 Systematically collect and review evidence on the effectiveness of supporting childhood and adolescent nutrition through education and youth support systems in different contexts</p> <p>13.2.11 Present evidence and create technical guidance and tools for implementing the approach</p>

Protecting nutrition in women of child-bearing age

Providing targeted support to women of child-bearing age can promote women's own nutritional health as well as having a positive effect on the nutritional health of their children and future children contributing to breaking the cycle of intergenerational malnutrition. Targeted support includes addressing women's specific needs in order to raise their nutritional status and working with women to raise their awareness of nutrition. While some people working in nutrition in humanitarian contexts may specialise in the nutritional health of women of child-bearing age, the domain is not restricted to specialists alone and is important for all of those working in Nutrition in Humanitarian contexts.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
14.1 Demonstrating understanding of the nutritional needs and vulnerabilities of women of child-bearing age	<p>14.1.1 Articulate the key benefits of protecting nutrition in women of child-bearing age in order to promote optimal nutrition during pregnancy and breastfeeding and break inter-generational cycles of growth failure</p> <p>14.1.2 Describe contextually relevant practices and beliefs that negatively impact nutrition in women of child-bearing age</p> <p>14.1.3 Describe specific interventions to protect and promote optimal nutrition during pregnancy and breastfeeding in women of child-bearing age</p>	<p>14.1.4 Ensure teams understand the needs, vulnerabilities and drivers of malnutrition in women of child-bearing age</p> <p>14.1.5 Ensure teams implement activities in adherence with applicable organisational, national, global guidelines, recommendations and codes</p> <p>14.1.6 Describe interventions and emerging innovative practice that protect and promote optimal nutrition during pregnancy and breastfeeding in women of child-bearing age</p>	<p>14.1.7 Develop and disseminate evidence-based guidance and tools to support the implementation of programmes to support nutritional status of women in child-bearing age in humanitarian contexts</p>
14.2 Providing nutritional support for women of child-bearing age	<p>14.2.1 Work collaboratively with relevant local actors to ensure nutritional support for women of child-bearing age is integrated into health and reproductive health services and programmes</p> <p>14.2.2 Provide or support nutrition counselling for improved dietary intake during pregnancy and breastfeeding</p> <p>14.2.3 Provide nutrition supplements and fortified food and advocate for adequate food rations for women of child-bearing age</p> <p>14.2.4 Provide micronutrient supplements for women during pregnancy and breastfeeding appropriately and in line with guidance</p> <p>14.2.5 Work with local health and reproductive health services to ensure women of child-bearing age receive nutrition counselling for improved dietary intake during pregnancy and breastfeeding</p> <p>14.2.6 Promote and support integration of nutrition counselling into pre- and post-natal visits as well as reproductive health programmes</p>	<p>14.2.7 Work collaboratively with relevant actors, to design programmes that promote adequate intake of nutrition for women of child-bearing age that are integrated with health and reproductive health services and programmes</p> <p>14.2.8 Manage and oversee distribution of nutrition supplements and fortified foods for women of child-bearing age and the distribution of micronutrient supplements for pregnant and breastfeeding women</p> <p>14.2.9 Work with health care actors to systematically integrate nutrition awareness programmes for women of child-bearing age into health and reproductive health systems and services</p> <p>14.2.10 Promote improving coverage of maternal nutrition programmes</p>	<p>14.2.11 Provide strategic level advice and support on integrating nutritional support into health and reproductive health services and programmes</p> <p>14.2.12 Provide technical advice and oversight for programmes to promote nutrition in women of child-bearing age</p> <p>14.2.13 Systematically collect and review monitoring and evaluation data on the effectiveness of different interventions and approaches</p> <p>14.2.14 Present evidence and create technical guidance and tools to support the promotion of nutrition in women of child-bearing age</p>

Protecting nutrition in people with additional needs related to health, age, disabilities or context

In humanitarian contexts, people with additional nutritional needs may have increased vulnerability, morbidity and mortality and specific approaches and interventions are required to address these. Additional nutritional needs may arise from underlying health conditions, infectious diseases, may present amongst the elderly or may be related to disabilities or gender. These needs and vulnerabilities may be linked to physiological causes or may be due to societal or cultural causes depending on the context such as beliefs, attitudes or practices that impact the access to nutritious diets of specific groups. To address these additional needs, it is important to have an understanding of factors that cause specific nutritional requirements, an awareness of appropriate interventions and the ability to closely coordinate with appropriate specialist actors.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
15.1 Demonstrating understanding of factors that contribute to specific nutritional needs	<p>15.1.1 Articulate the key nutrition needs, vulnerabilities and drivers of malnutrition in people with underlying health conditions, infectious diseases, the elderly and people with disabilities</p> <p>15.1.2 Describe contextually relevant practices and beliefs that negatively impact nutrition in specific groups</p> <p>15.1.3 Describe interventions to protect nutrition in people with additional nutrition needs</p> <p>15.1.4 Describe contextually relevant practices and beliefs that negatively impact nutrition in specific groups including girls and women and interventions that can address these</p>	<p>15.1.5 Ensure teams and partners understand the needs, vulnerabilities and drivers of malnutrition in people with underlying health conditions, infectious diseases, the elderly and people with disabilities, and the key interventions for prevention and treatment</p> <p>15.1.6 Ensure teams and partners understand contextually relevant practices and beliefs that negatively impact nutrition in specific groups including girls and women</p> <p>15.1.7 Lead identification of groups with additional nutrition needs in specific contexts and analysis contributing factors</p>	<p>15.1.8 Develop and disseminate evidence-based guidance and tools to support the implementation of programmes to support nutrition status of people with underlying health conditions, infectious diseases, the elderly and people with disabilities</p> <p>15.1.9 Design and lead research into factors contributing to additional nutrition needs in specific groups including girls and women</p> <p>15.1.10 Disseminate findings and recommendations for programming based on research</p>
15.2 Providing nutritional support for people with additional needs	<p>15.2.1 Promote appropriate diets and feeding practices amongst people with additional nutritional needs</p> <p>15.2.2 Provide fortified food and micronutrient supplements as required</p> <p>15.2.3 Integrate nutrition messaging and interventions into health services whenever appropriate and possible</p> <p>15.2.4 Implement activities to challenge and address attitudes, beliefs, customs and practices that negatively impact the nutrition status of particular groups</p>	<p>15.2.5 Incorporate activities into nutrition programming that address additional nutritional needs of specific groups and that are integrated into existing systems and services whenever appropriate and possible</p> <p>15.2.6 Incorporate activities into nutrition programming that address cultural beliefs and practices that negatively impact the nutrition status of specific groups</p> <p>15.2.7 Design and manage activities to promote adequate intake of nutrition for people with additional nutritional needs</p> <p>15.2.8 Manage and oversee distribution of nutrition supplements and fortified foods as required</p>	<p>15.2.9 Provide technical advice and oversight for programmes to promote nutrition in the elderly and people with underlying health conditions, infectious diseases and disabilities</p> <p>15.2.10 Systematically collect and review monitoring and evaluation data on the effectiveness of different approaches</p> <p>15.2.11 Present evidence and create technical guidance for implementing interventions to promote nutrition in people with additional nutrition needs that are integrated into existing systems</p> <p>15.2.12 Provide technical advice and support for developing interventions to support people with multiple, overlapping or additional vulnerabilities that impact on nutrition and that are integrated with health systems and other specialist services</p>

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
15.3 Coordinating with health care and other specialist actors	15.3.1 Identify people requiring referral for specialist medical or therapeutic support 15.3.2 Identify people with multiple vulnerabilities and make referrals to other specialists including child protection and GBV specialists	15.3.3 Build strong links with relevant specialist actors to establish referral pathways and integrate programming into existing systems and services in order to support nutrition and other vulnerabilities 15.3.4 Work collaboratively with other actors to analyse multiple overlapping vulnerability factors the negatively impact nutrition	15.3.5 Build strategic links with health care and other specialist actors to support programming for people with additional nutrition needs 15.3.6 Provide technical advice and support on integrating nutrition support for people with additional needs into existing systems
15.4 Promoting optimal nutrition with girls and women	15.4.1 Gather information on cultural and social practices and beliefs that negatively impact nutrition in girls and women 15.4.2 Work collaboratively with communities and other stakeholders to plan and implement awareness raising and education sessions and activities for girls and women on good diets and nutrition 15.4.3 Work with actors across sectors to implement activities that address contextual or societal factors related to gender that negatively impact nutrition	15.4.4 Systematically gather and analyse information on cultural and social practices and beliefs that negatively impact nutrition in girls and women and identifies interventions, approaches and appropriate messages to address these 15.4.5 Design and develop methods, tools and resources for promoting awareness and knowledge of nutrition with girls and women that take into account cultural and local beliefs and practices on nutrition for girls and women	15.4.6 Design and conduct research to collect evidence on specific cultural factors that negatively affect nutrition in girls and women on the effectiveness of specific interventions to address these beliefs 15.4.7 Provide technical advice on approaches to increase nutritional awareness and knowledge among girls and women and on integration optimal nutrition promotion messaging into health and reproductive health services and systems 15.4.8 Design and disseminate guidance and tools for promoting optimal nutrition women girls and women and for addressing cultural and social factors related to gender that negatively impact nutrition

Detecting and treating malnutrition

While prevention methods are important as a first means of promoting nutrition, detection and treatment of forms of malnutrition that increase morbidity, mortality and vulnerability are essential for when prevention measures have been unsuccessful. In humanitarian contexts, the appropriate treatment of malnutrition includes managing and treating wasting in infants, young children and vulnerable adults through community- and facility-based approaches as part of a continuum of care, and the correction of micronutrient deficiencies through blanket and targeted interventions.

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
16.1 Detecting malnutrition	16.1.1 Mobilise communities to engage in active case-finding 16.1.2 Conduct screening using standard assessment and diagnostic tools and growth charts accurately to correctly identify different forms of malnutrition, assess their severity and identify individuals in need of nutrition support 16.1.3 Identify appropriate treatment options for individuals based on their age, nutrition and health status and any additional nutritional needs in line with existing protocols 16.1.4 Identify cases for referral for specialist support in medical centres or stabilisation units as appropriate working through existing health services and systems whenever possible 16.1.5 Communicate effectively with affected people, their mothers or caregivers to explain the diagnosis and treatment options	16.1.6 Design screening activities to ensure appropriate case-detection and enhance coverage of treatment services 16.1.7 Conduct monitoring visits to sites to ensure the correct use of screening tools and appropriate identification of malnutrition and appropriate selection of treatment or referral options 16.1.8 Recommend and monitor corrective actions for screening and referral activities 16.1.9 Review screening data to inform planning and improve implementation of programme activities 16.1.10 Establish and strengthen linkages with existing health centres and services based on assessment of capacities	16.1.11 Provide technical oversight and support for activities and programmes to detect malnutrition sharing information on innovations as relevant 16.1.12 Analyse data screening data to establish indicative trends warranting further investigation 16.1.13 Work with key stakeholders to develop national or global guidelines and policy recommendations for improving referral systems and linkages with health services
16.2 Managing and treating wasting	16.2.1 Adhere to protocols for age-appropriate in- and out-patient treatment of people with severe and moderate wasting 16.2.2 Support and monitor community management of wasting activities 16.2.3 Provide ready to use supplementary and therapeutic foods as required in appropriate dosages and ensures users, mothers or caregivers have clear instructions on usage 16.2.4 Identify and refer people with severe wasting with health complications to stabilization centres for appropriate medical treatment 16.2.5 Accurately document and record all treatments and referrals	16.2.6 Share protocols for appropriate treatment of severe and moderate wasting and ensure compliance by team 16.2.7 Design and plan activities to support community management of wasting 16.2.8 Ensure sufficient and appropriate supplies for the treatment of wasting are procured and correctly stored 16.2.9 Supervise and support the correct implementation and accurate documentation of treatment and referrals 16.2.10 Conduct monitoring visits and review documentation to assess quality and accuracy of administration of treatments, referrals, follow-ups and discharge 16.2.11 Work collaboratively with implementation team to identify weaknesses with treatments and programming and define solutions	16.2.12 Create and periodically update contextually relevant protocols for the treatment of severe and moderate wasting 16.2.13 Collect and analyse data to identify and recommend adjustments and innovations to programming for the management and treatment of wasting 16.2.14 Undertake or contribute to research on the correction of micronutrient deficiencies to identify and assess improved and innovative treatments

Competency	If your role involves implementing nutrition interventions, you might need to:	If your role involves managing nutrition programmes and teams, you might need to:	If your role involves leading nutrition strategy development, you might need to:
<p>16.3 Correcting micronutrient deficiencies</p>	<p>16.3.1 Adhere to protocols and guidelines for correction and treatment of suspected and confirmed micronutrient deficiencies</p> <p>16.3.2 Provide food supplements, fortified foods, micronutrient supplements and deworming prophylactics appropriately and provide clear instructions for their correct use</p> <p>16.3.3 Accurately document and record all treatments provided</p>	<p>16.3.4 Share protocols and guidelines for appropriate treatment of micronutrient deficiencies and ensure compliance by team</p> <p>16.3.5 Ensure sufficient and appropriate supplies for the treatment of micronutrient deficiencies are procured and correctly stored</p> <p>16.3.6 Supervise and support the correct implementation and accurate documentation of treatment</p> <p>16.3.7 Conduct monitoring visits and reviews documentation to assess quality and accuracy of administration of treatments</p>	<p>16.3.8 Create and periodically update contextually relevant protocols for the correction of micronutrient deficiencies</p> <p>16.3.9 Collect and analyse data to identify and recommend adjustments and innovations to programming for the correction of micronutrient deficiencies</p> <p>16.3.10 Undertake or contribute to research on the correction of micronutrient deficiencies to identify and assess improved and innovative treatments</p>

Annex 1

Annex 1: Frequently Asked Questions on the Competency Framework

Q1. Do I need to demonstrate all of the competencies in the competency framework?

No individual is expected to demonstrate everything that is described in the framework.

Core values

The expectation is that everyone using the framework will demonstrate the core values and behaviours that accompany these. You may need to demonstrate additional values if you work for an organisation that has defined values for all staff members or volunteers.

Competency domains and competencies

Depending on your role, your organisation and your context, you might need to demonstrate all of the competency domains and competencies, or you might need to only demonstrate a selection of them. How they apply to you will be affected by factors such as:

- Whether you have a specific specialism or if your role is broader or more generalist;
- The size of the team in which you are working;
- How many support staff you are working alongside and what their specific roles are;
- The size and mandate of your organisation.

Decisions about which competency domains and competencies apply to which posts should be made by organisations – by HR teams or line managers. The required competency domains and competencies should then be recorded in a job profile or job description.

Behaviours

There are three categories of behaviours in the framework. These describe the types of behaviours you might demonstrate if you are:

- Implementing nutrition interventions;
- Managing nutrition teams and programmes;
- Providing strategic leadership for nutrition programmes.

Some roles will fit within one of these categories while other roles may span one or more category.

The behaviours that are described within each category are indicative. This means that they are not intended to be used as a checklist – some of the behaviours may not be applicable to your role, organisation or context. The behaviours can be adapted to the specific context.

Decisions about which category or categories your role fits into should be made by organisations – by HR teams or line managers – and the decisions should be clearly documented and communicated. For example, by including this in the job profile or job description.

Q2. Do I need to demonstrate anything else in addition to the competencies in the competency framework?

Yes, it is likely that you will be required to demonstrate other things in addition to the competencies in the competency framework. This could include:

A specific qualification

For example, some roles may require a mid-wife or nursing qualification.

Previous experience

For example, some roles may require a minimum number of years of experience in a similar role.

Contextual or organisational requirements

For example, a faith-based organisation may require a religious affiliation; or the context may require a set of language skills or that the post is held by someone of a particular gender.

Additional skills or requirements

For example, some posts have additional requirements such as:

- IT/ computer skills;
- A driving license;
- Willingness to live and travel in insecure environments.

In addition, some roles might also require other types of competencies that relate to other aspects of their professional roles.

The Competency Framework for Nutrition in Humanitarian Contexts is a **sector-based** competency framework. The competencies in the framework are defined in relation to the requirements of the Nutrition in Emergencies (NiE) sector: some of the competencies are unique to the sector (ie the **competencies for specific nutrition programming**) and some are shared by or similar to those required by other sectors (ie the **competencies for nutrition programming** and the core values). Sector-based competency frameworks are sometimes referred to as thematic or technical competency frameworks. Although many people working in humanitarian contexts operate within a single sector, there are roles that cut across sectors. In these cases, people may need additional competencies related to other sectors. For example, an Area Health and Nutrition Coordinator may need competencies for both nutrition and health.

In addition to **sector-based** competencies, people working in humanitarian contexts may require other types of competencies which could include:

- Professional competencies;
- Functional competencies;
- Organisation-specific competencies;
- Humanitarian competencies.

Definitions of these are given in the text box below.

The specific mix of types of competencies required should be clearly identified and described in a job profile or job description. It would be expected that in this process, the most important competencies would be prioritised, and any duplications eliminated so that expectations of an employee or volunteer are realistic and achievable.

The Core Humanitarian Standards Alliance developed guidance on [Integrating the CHCF with other Competency Frameworks](#). Although this applies specifically to the Core Humanitarian Competency Framework, the tools and guidance in the document can be adapted to the Competency Framework for Nutrition in Humanitarian Context.

Types of Competencies Required by People Working in Humanitarian Contexts



Sectoral competencies relate to the sector or technical specialism. The Competency Framework for Nutrition in Humanitarian Context is a sector-based competency framework for Nutrition in Emergencies.

Professional competencies relate to specific professional qualifications and the associated competencies. These are not included in the Competency Framework for Nutrition in Humanitarian Contexts and would need to be drawn from other frameworks if they are required. This would apply to posts that require a medical degree or a nursing or mid-wife qualification for example.

Functional competencies relate to the purpose or function of a role which may require the post-holder to have additional specific competencies. For example, a 'Nutrition in Emergencies Trainer' might need a full set of competencies related to the design and delivery of formal and informal training.

Organisation-specific competencies relate to those competencies that are defined by an organisation for their own employees and volunteers. As the framework is designed for use across the sector by many organisations, there are no organisation-specific competencies in the framework. Any organisation that wishes to use the framework can use it alongside their organisational competency frameworks in cases where these exist.

Humanitarian competencies are essential for all humanitarians. However, the Competency Framework for Nutrition in Humanitarian Contexts does not include these as it is intended to be used in conjunction with the [Core Humanitarian Competency Framework \(CHCF\)](#) which outlines these core competencies.

Q3. How can I use the competency framework in practice?

The competency framework can be used by different types of people for different purposes. These fall into two broad categories of assessing competencies and building competencies.

	Identifying competencies	Assessing competencies	Building competencies
An individual may use the framework to:	Identify which competencies they need in their current or future roles to support their professional or career development.	Assess their current level of proficiency by conducting a self-assessment.	Identify gaps in their competencies that they need to address in order to improve their performance or develop their career and identify opportunities and resources for addressing these capacity gaps.
An employing organisation may use the framework to:	Identify which competencies are needed in specific roles or teams and articulate these in job profiles and job descriptions or to support talent management and succession planning.	Assess the level of competency of applicants during recruitment using competency-based assessment methods or of existing staff in performance appraisals or in organisation-wide learning needs analyses.	Provide competency-based capacity building opportunities to staff or groups of staff using formal methods such as training or informal methods such as mentoring, shadowing or secondments.
Educational institutes may use the framework to:	Identify which competencies their students need to develop in order to work effectively in the sector and what underlying knowledge and skills they need to have in order to build these competencies.	Assess the starting level of proficiency of their students and their progress against the competencies as a result of the learning programme provided.	Provide learning programmes to students currently working in the sector and those who intend to do so, that are designed to build the competencies outlined in the framework.

To support each of these functions, specific tools may be required. Examples of these can be found in the [GUAC Urban Competency Framework User Guide](#). Although the tools in this guide relate to the Urban Competency Framework, they can be adapted for use with the Competency Framework for Nutrition in Humanitarian Contexts.

In addition, guidance on how to assess competencies can be found in the [HPass Standards for the Assessment of Humanitarian Competencies](#).

Q4. How can I use the competency framework to assess my own or someone else's level of competency?

As competencies relate to a person's professional performance, assessment of competencies needs to gather evidence on how effectively a person performs or undertakes the responsibilities of their role.

The behaviours that accompany the competencies define the types of thing that a competent person might be seen to do on a habitual basis. As such, they can be used to help assessment of whether, or to what extent a person is competent.

Evidence of how a person performs in a professional environment can be gathered through:

- Observation in a real professional environment (for example, by a line manager or colleagues in performance appraisals);
- Observation in a simulated environment (for example, as a culmination of a training course or as part of a recruitment process);
- Presentation and discussion of specific examples as evidence presented orally or through testimonials (for example, in a competency-based interview or through the gathering or competency-based references).

Once information is gathered, it needs to be assessed. For each competency that is being assessed, the assessor can ask the following questions:

- Is there sufficient evidence to assess whether or not this person demonstrates this competency in a professional environment or do we need to gather more?
- How well does this person perform this competency based on the evidence gathered?

A simple five-point scale can be used to grade the performance of a person against each competency:

1	Not competent	The person does not display any behaviours that indicate they are proficient in this competency. They are not able to carry out this aspect of the role.
2	Limited competence	The person displays some of the applicable behaviours some of the time but is not consistent and may need support. They are able to carry out this aspect of the role with support and guidance.
3	Acceptable level of competence	The person displays most of the applicable competencies most of the time. They are able to carry out this aspect of the role without support but may need guidance on occasion.
4	Good level of competence	The person displays all of the applicable competencies in all relevant situations. They are able to carry out this aspect of the role without support or guidance.
5	Highly competent	The person displays all of the applicable behaviours at a very high level. They exceed the requirements of the role and are able to guide and support others in this aspect of the role.

Example of a Competency Assessment using an Assessment Matrix

Name of staff member:	<i>Name</i>	Job title:	<i>Nutrition Manager</i>
Name of assessor:	<i>Name</i>	Category of role:	<i>Management of Nutrition Teams and Programmes</i>
Date of assessment:	<i>Date</i>	Method and purpose of assessment:	<i>Competency-based interview for recruitment of a new hire</i>

Competency	Summary of evidence provided in relation to applicable behaviours	Grade (1-5)	Comment on current performance or requirements for further development
3.1 Identifying target populations and their nutrition needs	<i>Candidate described three separate occasions on which they had used assessment data to identify and quantify target populations. They provided details of how they worked with other actors to do this. The candidate described how they worked with relative independence on the last occasion.</i> <i>The candidate provided detailed evidence about how they had sought out community perspectives, how they had used this to inform priorities and was able to explain why this was important.</i>	4	<i>Candidate has shown they are capable of this competency and has provided detailed evidence of doing it effectively on more than one occasion. The assessment is that this person has a good level of competence in this area and would be able to carry out this aspect of the role without support or guidance.</i>
3.2 Identifying appropriate interventions to meet target populations' identified needs	<i>Candidate described how they had identified interventions based on assessment data. However, the range of interventions they described was limited and did not appear to reflect up to date innovations or approaches. Candidate was not able to provide any evidence of how they kept their own knowledge of innovations up to date. The candidate was not able to provide any real or hypothetical examples of adapting an intervention to suit the cultural context.</i>	2	<i>The candidate has experience in some aspects of this competency but not all. The evidence suggests that they would need guidance or support in this area. Specifically, they would need to improve their knowledge of a range of interventions, their ability to adapt these to the context and they would need to take steps to keep their professional knowledge up to date.</i>

Is this candidate suitable for the post? Yes / Yes, but with support / No

Comment:

Annex 2: Development of the Competency Framework for Nutrition in Humanitarian Contexts

Acting on behalf of the GTAM Global Working Group on Nutrition in Emergencies Capacity Development, UNICEF commissioned RedR UK to update the 2013 [Competency Framework for Nutrition in Emergencies](#)¹.

Work on the framework took place between August and December 2020 and was a consultative process that reached out to GNC partners and observers and other NiE stakeholders. A Task Force comprising volunteers from GNC partner and observer organisations was created to oversee the process and to ensure that the updated framework met the needs of a wide range of actors in nutrition in emergencies. The role of the Task Force was to provide oversight on the consultation process, contribute expertise and resources to support the development of the framework, review drafts of the framework and sign off the final document. A list of Task Force members can be found in Annex 3.

Development of the competency framework involved three stages:



1. Desk research

Through early August, a review of a wide range of published and unpublished documents was undertaken. In total, 143 documents from 55 organisations were reviewed. The purpose of the review was to identify:

- The key tasks, responsibilities, skills, knowledge and competencies required by those working in nutrition in humanitarian contexts;
- The types of roles that were prevalent and their key tasks and responsibilities;
- Trends and features of other relevant and comparable competency frameworks;
- Any relevant and significant developments in the field of nutrition in emergencies that had arisen since 2013.

The desk research covered the following types of documents and resources (see Annex 3 for a full list of documents):

- Nutrition and other relevant strategies, guidelines, documents and resources (30 documents);
- Competency framework (29 frameworks);

¹ The 2013 Nutrition in Emergencies Competency Framework was developed by: Jessica Meeker, Abigail Perry and Andrew Seal from UCL Institute for Global Health, Institute of Child Health, University College London; Carmel Dolan from the Emergency Nutrition Network; Colleen Emary from World Vision International Nutrition Centre of Expertise; Kate Golden from Concern Worldwide; Caroline Abla from International Medical Corps; Anne Walsh from Valid International; and Ali Maclaine from Save the Children UK.

- Minimum standards (4 standards);
- Training materials (10 training courses);
- Job descriptions (71 job descriptions).

Documents and resources were retrieved from public sources and were requested from GNC partner and observer organisations. Efforts were made to ensure that the resources covered a broad range of organisations and that they reflected current practice and emerging approaches. Documents were sourced from: seven UN agencies, two global clusters, 27 INGOs, three donors, four universities, eleven cross-organisational initiatives including one representing 22 NNGOs and the IFRC.

2. Consultation

In late August and early September, consultations were conducted with Task Force members and GNC partners and observers. Consultations took the form of a survey and a series of in-depth interviews. The purpose of the consultations was to:

- Seek feedback on what aspects of the 2013 Nutrition in Emergencies Competency Framework required updating;
- Explore trends emerging from the desk research.

The online survey was sent to 98 individuals from 40 organisations and received 16 responses. The respondents comprised: 12 individuals from GNC partner and observer organisations, 2 independent nutrition consultants and 2 anonymous respondents.

The survey included three sections:

- Competencies required by someone working in nutrition in humanitarian contexts in relation to the current NiE Competency Framework and the Core Humanitarian Competency Framework;
- The structure and format of the competency framework;
- Values – whether they should be included in the framework and if so which values these should be.

In-depth interviews were offered to Task Force Members and survey respondents. In total, 19 in-depth interviews were conducted.

3. Feedback and review

The drafting process was undertaken in two stages: in the first stage, an initial list of competency domains and competencies was drafted and in the second stage, a full competency framework with indicative behaviours was developed. Three rounds of feedback were gathered at each stage via written feedback on the drafts and discussion within the Task Force.

Drafts were shared with the Task Force, GNC partners and observers and other sector specialists.

A full list of all those who contributed to the development of the competency framework, through the consultations and feedback and review, can be found in annex 2.

Annex 3: List of Contributors

#	Name	Job Title	Organisation
RedR UK Drafting Team			
1	Emily Fereday	Lead Consultant	Independent
2	Keti Khurtsia	Programme Manager	RedR UK
Task Force Members			
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4	Linda Shaker Barbari	IFE Core Group	ENN
5	Suzanne Brinkmann	Senior Nutrition Advisor, Emergencies	IMC
6	Sanjay Kumar Das	Nutrition Specialist	UNICEF Myanmar
7	Colleen Emary	Senior Technical Advisor-Health & Nutrition	WVI
8	Gwenaelle Garnier	Nutrition in Emergencies Team Lead	WFP
9	Megan Gayford	Nutrition Advisor, Emergency Nutrition	UNICEF
10	Angeline Grant	GNC Coordination Helpdesk & Capacity Development	UNICEF
11	Saul Guerrero	Senior Nutrition Adviser, Emergency Nutrition	UNICEF
12	Alessandro Iellamo	Global IYCF-E Adviser	Save the Children UK
13	Andi Kendle	Program Director	Tech RRT, IMC
14	Marie McGrath	Director	ENN
15	Reuel Kirathi Mungai	Nutrition Specialist (ERT)	UNICEF
16	Louise Mwirigi	Nutrition Specialist (Information)	UNICEF
17	Natsayi Nembaware	Senior Technical Advisor for Nutrition	ADRA
18	Lindsey Pexton	Senior Nutrition Advisor	Mercy Corps
19	Alexandra Rutishauser-Perrera	Head of Nutrition	AAH UK
20	Anna Ziolkovska	Deputy GNC Coordinator	UNICEF
Other Contributors			
21	Caroline Abla	Freelance Consultant	Independent
22	Andrew Beckingham	Humanitarian Nutrition Advisor	Save the Children UK
23	Erin Boyd	Nutrition Advisor	USAID
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26	Alison Farnham	Public Health Nutritionist	Action for Development
27	Jacqueline Frize	Independent Nutritionist	Independent
28	Caitlin Gomez	Technical Officer	Nutrition International
29	Elena Gonzalez	International Development and Humanitarian Research and Advocacy Consultant	Independent
30	Alexandra Humphreys	Nutrition Assessment Technical Advisor	ACF
31	Heqian Kuang	Associate Nutrition and Food Security Officer	UNHCR
32	Mutungu Mueni	Nutrition Specialist	UNICEF
33	Julie Tanaka	Senior Global Technical Advisor, Nutrition	Samaritan's Purse

NB Contributors are listed in alphabetical order of their surname. The list of contributors includes individuals who responded to the survey, participated in an interview, provided documents or resources, provided feedback on drafts of the framework and/or who participated in online discussions as part of the Task Force.

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Developed by:

